

Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi @jsitel.com June 26, 2014

Via Hand Delivery

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC Docket No. 10-90, WC Docket No. 11-42 2014 ETC Annual Report of Lakeside Tel. Co.

Study Area Code 280457

Dear Ms. Dortch:

On behalf of Lakeside Tel. Co. ("Lakeside"), JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules. Lakeside seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information. The redacted version is also being filed this date via the FCC's Electronic Comment Filing System. In addition, attached is a letter requesting confidential treatment under Sections 0.457 and 0.459 of the initial section 54.202(a) Five-Year Service Quality Improvement Plan.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall
JSI Vice President

301-459-7590

jkuykendall@jsitel.com

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

¹ 47 C.F.R. §§ 54.313, 54.422.

² Connect America Fund et al., WC Docket No. 10-90 et al., Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

³ 47 C.F.R. §§ 0.457, 0.459, 54.202(a).



7852 Walker Drive, Suite 200 Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi @jsitel.com

June 26, 2014

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC Docket No. 10-90, WC Docket No. 11-42 2014 ETC Annual Report of Lakeside Tel. Co. Study Area Code 280457 Request for Confidentiality

Dear Ms. Dortch:

John Staurulakis, Inc. ("JSI"), on behalf of its client Lakeside Tel. Co. (the "Company") hereby requests, pursuant to Sections 0.457 and 0.459 of the Commission's rules, withholding from public inspection certain information contained in an attachment to the above referenced reporting requirement. The Company provides the following in support of its request, numbered consistent with the subparagraphs of Section 0.459(b).

- 1. The information for which the Company is seeking confidential treatment is an attachment to the Company's annual reporting information pursuant to Sections 54.313 and 54.422 of the Commission's rules ("Report").³
- 2. Rate-of-Return Eligible Telecommunications Carriers ("ETCs") must file with the Commission an initial section 54.202(a) Five-Year Service Quality Improvement Plan ("Five-Year Plan") which is contained in the attachment to the 2014 Report.⁴
- 3. The information contained in attachment for which the Company seeks the withholding from public inspection is the entirety of data pertaining to the Company's Five-Year Plan provided at FCC Form 481 Line 112 attachment. Information of this nature is confidential commercial information routinely withheld from public inspection.

¹ 47 C.F.R. §§ 0.457, 0.459.

² 47 C.F.R. § 0.459(b)(1) through (9).

³ 47 C.F.R. §§ 54.313, 54.422.

⁴ See In the Matter of Connect America Fund, WC Docket No. 10-90, Order DA 14-591 (rel. May 1, 2014).

4. With respect to identifying the degree to which the subject attachment concerns a service that is subject to competition, the information is of a financial and competitive nature regarding the provision of telecommunications services. The Line 112 attachment contains competitively sensitive information related to proposed improvements or upgrades and maintenance the Company's network.

In its March 5, 2013 Order, the FCC. The FCC specified that for rate-of-return carriers, the five-year plans "should describe the carrier's network improvement plan, which should provide greater visibility into current plans to extend broadband service to unserved locations in rate-of-return service territories." Accordingly, because the Company is a rate-of-return carrier, it must file a five-year service improvement plan which contains proprietary, competitively sensitive information related to the Company's existing network including the specific locations of customers as well as describe proposed improvements or upgrades and maintenance of its network throughout its service area. Specifically, this information sets forth services provided by the Company over its existing network including specific locations of customers as well as planned network improvement and maintenance for the years 2015 through 2019 including project start and completion dates, population that will be impacted by the improvements and upgrades at the wire center level and projected capital costs associated with the improvements and upgrades and operating costs associated with maintaining the network including depreciation for investments that have already been made. As such, this information contains competitively sensitive information related to the Company's existing network as well as detailed plans at the wire center level for network upgrades and maintenance projected for the years 2015 through 2019.

- 5. With respect to identifying possible exposure to competitive harm, the information contained in the Line 112 attachment is information that is not customarily released to the public. This information is proprietary to the Company, is unique to the Company's serving territory and is only known to the Company and its authorized agents. If the Information is not protected, it would have economic value to potential competitors who would be able to target their marketing to specific customers. In a competitive telecommunications marketplace, this type of information is highly sensitive. If publicly disclosed, it would enable competitors to craft business plans that capitalize on their knowledge of the locations of the Company's customers which would place the Company at a competitive disadvantage.
- 6. With respect to steps the Company has taken to ensure against unauthorized disclosure of the information contained in the attachment, the Company is filing the attachment under seal. The Company uses the information contained in the Five-Year Plan to ensure that its customers continue to receive state-of-the-art high quality telecommunications and broadband services that the Company has

⁵ See Connect America Fund et al., WC Docket 10-90 et al., Order, DA 13-332 (rel. Mar. 5, 2013) ("March 5, 2013 Order") at para 9 citing Section 54.202(a) (1) (ii).

been providing to them for many years as well as to satisfy mandatory reporting requirements and does not share the information for which protection is sought. The Company protects the secrecy of this information with a security protocol that ensures the information is not inadvertently disclosed or disseminated. Only directors, managers and employees with a direct need to know are authorized to access the information.

- 7. Any previous versions of this information are not publicly available.
- 8. Because the information is not routinely available, a need exists for maintaining the confidentiality of this information permanently.
- 9. Not applicable.

Based on the preceding, JSI respectfully requests on behalf of the Company that the Commission grant confidential treatment under Section 0.459 to Company's Five-Year Plan provided at FCC Form 481 Line 112 attachment.

Please contact the undersigned with any questions regarding this request.

Sincerely,

John Kuykendall JSI Vice President 301-459-7590

jkuykendall@jsitel.com

Il Kkendell

FCC Form 481 - Carrier Annual Reporting

<3005>

REDACTED FOR PUBLIC INSPECTION

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

	Data Collection Form	July 2013		
<010>	Study Area Code	280457		Π
<015>	Study Area Name	LAKESIDE TEL. CO.		_
-				_
<020>	Program Year	2015		
<030>	Contact Name: Person USAC should contact with questions about this data	Robert O. Sledge, Jr.		
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6625693311 ext.		
<039>	Contact Email Address: Email of the person identified in data line <030>	rsledge@deltaland.net		
			54.313 54.422	
ANNUA	L REPORTING FOR ALL CARRIERS		Completion Completion Required Required	
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	(check box when complete)	V
		Ī	✓ ✓	
<200> <210>	Outage Reporting (voice)	(complete attached worksheet) L		700
<300>	Unfulfilled Service Requests (voice)	outages to report	✓ [[]]	
<300>	official linear Service Requests (Voice)			
<310>	Detail on Attempts (voice)			O
.510	Jetan en Accempte (Veree)			- Contract
		(attach descriptive docu	iment)	
<320>	Unfulfilled Service Requests (broadband)			O
		<u> </u>		-
<330>	Detail on Attempts (broadband)	L		0
		(attach descriptive doc	cument)	
<400>	Number of Complaints per 1,000 customers (voice)			_
<410> <420>	Fixed 0.0 Mobile 0.0		✓ ✓	
<430>	Number of Complaints per 1,000 customers (broadl	l pand)	(9.
<440>	Fixed 0.0	, and ,		K
<450>	Mobile 0.0			
<500>	Service Quality Standards & Consumer Protection R	ules Compliance (check to indicate certification)	✓ ✓	_
	280457ms510.pdf			
<510>		(attached descriptive document)	✓ ✓	٦
				_
<600>	Functionality in Emergency Situations	(check to indicate certification)	√	٦
	280457ms610.pdf			
		(attached descriptive document)	✓ ✓	٦
640		, ,		_
<610>				
<700>	Company Price Offerings (voice)	(complete attached worksheet)		8
<710>	Company Price Offerings (broadband)	(complete attached worksheet)		N
<800>	Operating Companies and Affiliates	(complete attached worksheet)	✓ ✓	
	Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)		
<1000>	Voice Services Rate Comparability	(check to indicate certification)	✓	
<1010>		(attach descriptive document)		
<1010 <i>></i>		[,		
				100
<1100>	· Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)		1
<1110>		(complete attached worksheet)		N
	Terms and Condition for Lifeline Customers	(complete attached worksheet)	√	
	Price Cap Carriers, Proceed to Price Cap Additional	Documentation Worksheet		
	Including Rate-of-Return Carriers affiliated with Pr			
<2000>	S S S S S S S S S S S S S S S S S S S	(check to indicate certification)		Š
<2005>		(complete attached worksheet)		0
	Rate of Return Carriers, Proceed to ROR Additional	Documentation Worksheet		-
<3000>		(check to indicate certification)	✓	ø

(complete attached worksheet)

(100) Sr Data Cc	(100) Service Quality Improvement Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>		į	
<0.15>	ame	LAKESIDE IEL. CO.	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Robert O. Sledge, Jr.	
<032>	Contact Telephone Number - Number of person identified in data line <030>	6625693311 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030> **	rsledge@deltaland.net	
<110>	Has your company received its ETC certification from the FCC?	(yes / no)	
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes/no)	
<112>	If your answer to Line <11.1> is yes, then you are required to file a progress report, on line <1.12> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.	280457ms112.pdf	
	Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document	
<pre><113> <114> <115> <115> <115> <116> <117> <118> </pre>	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received How (USF) was used to improve service quality How (USF) was used to improve service coverage How (USF) was used to improve service rapacity Provide an explanation of network improvement targets not met in the prior calendar year.		

(200) Sei	(200) Service Outage R	(200) Service Outage Reporting (Voice)	(e)						FCC	FCC Form 481 OMB Control No. 3060-	FCC Form 481 OMB Control No. 3060-0886/OMB Control No. 3060-0819	. 3060-0819
									\lnr	July 2013		
<010>	Study Area Code	ode				280457						
<015>	Study Area Name	Jame				LAKESIDE TEL.	L. CO.					
<020>		ī				2015						
<030>	Contact Nam	Contact Name - Person USAC should contact regarding this data	S should contac	ct regarding thi	s data	Robert O. S	Sledge, Jr.					
<032>		Contact Telephone Number - Number of person identified in data line <030>	- Number of pe	erson identified	in data line <0.	6625693311	ext.					
<039>		Contact Email Address - Email Address of person identified in data line <030>	il Address of pu	erson identifiec	in data line <0	030> rsledge@deltaland.net	taland.net					
<220>	^e∨	<	<	<	<	<c1></c1>	<c2></c2>	φ >	\ \ \	\$	\ \ \	\$
	Ref		Outage Start Outage Start	no	Outage End	Number of		911 Facilities	Service Outage	Did This Outage Affect Multiple		
	Number		Time		Time	Customers Affected	Total Number of	Affected (Voc. / No.)	Description (Check	Study Areas	Service Outage	Preventative
								(0) (6)	all triat approx	(0) (6)		Simpool

(700) Pri	ce Offerings in	(700) Price Offerings including Voice Rate Data	Data				2 3	FCC Form 481	
Data Col	Data Collection Form						NO Inf	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	. Control No. 3060-0819
<010>	Study Area Code	qe			280457				
<015>	Study Area Name	ıme			LAKESIDE TEL.	IL. CO.			
<020>	Program Year				2015				
<030>	Contact Name	Contact Name - Person USAC should contact regarding this data	d contact regard	ing this data	Robert O. S	Sledge, Jr.			
<032>	Contact Telep	Contact Telephone Number - Number of person identified in data line <030>	er of person ide	ntified in data line <	6625693311	ext.			
<039>	Contact Email	Contact Email Address - Email Address of person identified in data line <030>	ess of person ide	ntified in data line <	<pre><030> rsledge@deltaland.net</pre>	taland.net			
1000		م المراك من المراك المراك	04:00 OX:400		7100				
	Residential Ld Single State-w	Kesidential Local Service Charge Effective Date Single State-wide Residential Local Service Charge	ective Date Service Charge	14.0	1/1/2014				
<703>	<a1>></a1>	<a>>	<a>2	<	<	<	 	<\$20 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$
	1 5	•			Residential Local		-	Area	÷
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
					See at	See affached worksheet			

(710) Bro	(710) Broadband Price Offerings	FCC Form 481
Data Co	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-09819
		July 2013
<010>	<010> Study Area Code	280457
<015>	<015> Study Area Name	LAKESIDE TEL. CO.
<020>	<020> Program Year	2015
<030>	<030> Contact Name - Person USAC should contact regarding this data	Robert O. Sledge, Jr.
<032>	<035> Contact Telephone Number - Number of person identified in data line <030>	6625693311 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data line <030>	<pre><030> rsledge@deltaland.net</pre>

<d4>></d4>	Usage Allowance Action Taken When Limit Reached {select}												
<q3></q3>	Usage Allowance (GB)												
<d2></d2>	Broadband Service - Upload Speed (Mbps)												
<d1></d1>	Broadband Service - Download Speed (Mbps)												
\$	Total Rate and Fees					pad	2						
<	State Regulated Fees					See attac	workshoot	MOINSHEEL					
 	Residential Rate												
<a2></a2>	Exchange (ILEC)												
<a1>></a1>	State												
<711>		'	. '	•	•								

FCC Form 481	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013									<83>	Doing Business As Company or Brand Designation												
			co.		ige, Jr.		land.net			<a2></a2>	SAC												
		280457	LAKESIDE TEL.	2015	Robert O. Sledge,		rsledge@deltaland.net																
(800) Operating Companies	Data Collection Form	<010> Study Area Code		<020> Program Year	<030> Contact Name - Person USAC should contact regarding this data	<035> Contact Telephone Number - Number of person identified in data line <030>		<810> Reporting Carrier Lakeside Telephone Company		<813>	Affiliates												

(900) Tribal Lands Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<015> Study Area Name <020> Program Year	LAKESIDE TEL. CO. 2015
	Robert O. Sledge, Jr.
<035> Contact Telephone Number - Number of person identified in data line <030>	6625693311 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	rsledge@deltaland.net
<910> Tribal Land(s) on which ETC Serves	
<920> Tribal Government Engagement Obligation	
	Name of Attached Document
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to (Yes,No, § 54.313(a)(9) includes:	sct No,
<921> Needs assessment and deployment planning with a focus on Tribal community analysis institutions.	
<922> Feasibility and sustainability planning;	
<923> Marketing services in a culturally sensitive manner;	
<925> Compliance with Land Use permitting requirements <926> Compliance with Eacilities Siting rules	
<928> Compliance with Cultural Preservation review processes	
<929> Compliance with Tribal Business and Licensing requirements.	

(1100) N	(1100) No Terrestrial Backhaul Reporting	FCC Form 481
Data Co	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	. 280457
<015>	Study Area Name	LAKESIDE TEL. CO.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert O. Sledge, Jr.
<032>	Contact Telephone Number - Number of person identified in data line <030>	6625693311 ext.
<039>		rsledge@deltaland.net
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
	Please check this box to confirm the reporting carrier offers	
<1130>	broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013				Name of Attached Document				
	280457 LAKESIDE TEL. CO.	2015 Robert O. Sledge, Jr. ta line <030> 6625693311 ext. ata line <030> rsledge@deltaland.net	280457ms1210.pdf	НТТР	ne 1210, o must	<u>\</u>		
(1200) Terms and Condition for Lifeline Customers Lifeline Data Collection Form	Study Area Code Study Area Name	Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	<1210> Terms & Conditions of Voice Telephony Lifeline Plans	Link to Public Website	"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	Details on the number of minutes provided as part of the plan,	<1223> Additional charges for toll calls, and rates for each such plan.
(1200) T Lifeline Data Col	<010>	<020> <030> <035> <035>	<1210>	<1220>	"Please check th or the website li § 54.422(a)(2) a annually report:	<1221>	<1222>	<1223>

	DEDACTED FOR DITUIN INFORMATION
	NEDACTED FOR FOREIGN FOR FOREIGN
(3000) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	280457
<015>	Study Area Name	LAKESIDE TEL. CO.
<020>		2015
<030>		Robert O. Sledge, Jr.
<035>	Contact Telephone Number - Number of person identified in data line	6625693311 ext.
<039>	Contact Email Address - Email Address of person identified in data line <u3u></u3u>	rsledge@deltaland.net
	the boxes below to note compliance on its five year service quality plan (pursuant CFR § 54.313(f)(2). I further certify that the	CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.
(3010)	Progress Report on 5 Year Plan Milestone Certification (477CFR § 54.313ff)(1)fi)	
		Name of Attached Document Listing Required Information
(3011)	Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	12 contains the required information pursuant to ses of community anchor institutions to which began
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)	
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)} If yes, does your company file the RUS annual report	Name of Attached Document Listing Required Information (Yes/No) (Yes/No) (Yes/No) (Yes/No)
Please		check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54,313(i)(2) compliance requires:
(3015)		
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	I Flows 180457ms3017.pdf
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	
(3018)	if the resnanse is no on line 3014. Is vour company audited?	Name of Attached Document Listing Required Information (Yes/No)
(2522)		
(3019)	n use reponse is yes unite 2016 presectives the control of the confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications	nat comparable to RUS Operating Report for Telecommunications
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	sh Flows
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.	erformed the company's financial audit.
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	
(3022)		
(3023)		
(3024)	public accountant: Underlying information subjected to an officer certification. Document(s) for Balance Sheet, Income Statement and Statement of <u>Cash Flows</u>	h Flows
(3026)	Attach the worksheet listing required information	
	_	Name of Attached Document Listing Benuired Information
		Name of Attached Document Listing negatives a migration

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	280457
<015>	Study Area Name	LAKESIDE TEL. CO.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert O. Sledge, Jr.
<035>	Contact Telephone Number - Number of person identified in data line <030>	6625693311 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rsledge@deltaland.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: LAKESIDE TEL. CO.

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/25/2014

Printed name of Authorized Officer: Robert Sledge

Title or position of Authorized Officer: President

Telephone number of Authorized Officer: 6625693311 ext.

Study Area Code of Reporting Carrier: 280457 Filing Due Date for this form: 07/01/2014

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	280457
<015>	Study Area Name	LAKESIDE TEL. CO.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Robert O. Sledge, Jr.
<035>	Contact Telephone Number - Number of person identified in data line <030>	6625693311 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	rsledge@deltaland.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to A	horize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; agent; and, to the best of my knowledge, the reports a	is authorized to submit the information reported on behalf of the reporting carrier. In presponsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form	an be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

	Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier										
		uthorized to submit the annual reports for universal service support recip he reporting carrier; and, to the best of my knowledge, the information re									
		the reporting carrier, and, to the best of my knowledge, the information re	ported herein is accurate.								
Name	of Reporting Carrier:										
Name	Name of Authorized Agent or Employee of Agent:										
Signati	Signature of Authorized Agent or Employee of Agent: Date:										
Printed	Printed name of Authorized Agent or Employee of Agent:										
Title or position of Authorized Agent or Employee of Agent											
Teleph	Telephone number of Authorized Agent or Employee of Agent:										
Study A	Area Code of Reporting Carrier:	Filing Due Date for this form:									
	Persons willfully making false statements on this f	orm can be punished by fine or forfeiture under the Communications Act of 1934, 18 of the United States Code, 18 U.S.C. § 1001.	47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title								

Attachments

LAKESIDE TELEPHONE COMPANY (SAC 280457) ATTACHMENT - LINE 112 FIVE YEAR SERVICE QUALITY IMPROVEMENT PLAN

ATTACHMENT REDACTED IN ENTIRETY

Lakeside Telephone Company

Study Area Code: 280457

Response to Line 510 – Service Quality Standards and Consumer Protection Rule Compliance for Voice and Broadband

In establishing this certification in its 2005 ETC Order,¹ the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers."² The Commission found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement" and that the sufficiency of other commitments would be considered on a case-by-case basis.³ In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement."

Lakeside Telephone Company ("Company") hereby certifies that it is complying with applicable service quality standards and consumer protection rules. The Company is subject to consumer protection obligations under state law. These obligations include, but are not limited to, the following: (1) filing a Local Exchange Tariff pursuant to the requirements of the Mississippi Public Service Commission which disclose rates, terms, and conditions of service to customers; (2) adherence to state consumer protection requirements governing telephone

¹ Federal-State Joint Board on Universal Service, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("2005 ETC Order").

² *Id.* at para. 28.

³ The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: "(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy." *Id.* at n. 71.

⁴ *Id.* at n. 72.

providers under Title 39 Utilities, Part III Rules and Regulations Governing Public Utility Service, Subpart 1, General Rules, and Subpart 3, Special Rules – Telephone Companies, including requirements for customer service, billing, consumer complaints, rates and charges, and slamming, under Mississippi Code Annotated Title 77, Chapter 3 Statutes; (3) truth-in-billing requirements; and (4) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

Lakeside Telephone Company is also subject to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3.

Lakeside Telephone Company

Study Area Code: 280457

Response to Line 610 - Ability to Function in Emergency Situations

Lakeside Telephone Company ("Company") hereby certifies that it is able to function in emergency situations as set forth in the Code of Federal Regulations, Title 47, Part 54, Subpart C, §54.202(a)(2)¹ and in accordance with the orders in Mississippi Public Service Commission Docket No. 2005-AD-662. The Company's network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a) (2). The Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require.

Specifically in accordance with the orders in Mississippi Public Service Commission Docket No. 2005-AD-662, Lakeside Telephone Company has a reasonable amount of backup power to ensure functionality without an external power source and is able to reroute traffic and manage traffic spikes. In addition, Lakeside Telephone Company has comprehensive emergency operations plans in place and will adhere to FCC reporting requirements regarding outages and provide copies of such reports to the Mississippi Commission upon request.

The company's standby generators and battery back-up support both voice and broadband network equipment should an emergency situation occur.

¹ Section 54.202(a) (2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

(700) Pr	ice Offerings	(700) Price Offerings including Voice Rate Data	ata				Ħ.	FCC Form 481	
Data Co	Data Collection Form	u					0	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	3 Control No. 3060-0819
<010>	Study Area Code	Code			280457				
<015>		Name			LAKESIDE TE	TEL. CO.			
<020>	Program Year	ar			2015				
<030>		Contact Name - Person USAC should contact regarding this data	contact regard	ing this data	Robert O. 8	Sledge, Jr.			
<032>		Contact Telephone Number - Number of person identified in data line <030>	r of person ide	ntified in data line <	<030> 6625693311 ext.	ext.			
<039>		Contact Email Address - Email Address of person identified in data line <030>	ss of person ide	entified in data line		rsledge@deltaland.net			
<701>		Residential Local Service Charge Effective Date	ctive Date	1/1	1/1/2014				
<702>		Single State-wide Residential Local Service Charge	ervice Charge	14.0	0				
<703>									_
	<a1></a1>	<a2></a2>	<a3></a3>	 	 	 	 	<	<c></c>
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
	MS	Lakeside		FR	14.0	0.0	0.0	0.0	14.0

<010> Study Area Code <015> Study Area Name								FCC Form 481 OMB Control No. 3060-0986 July 2013	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<015> Study Area	Code			280457					
	Vame			LAKESII	LAKESIDE TEL. CO.				
<020> Program Year	3r			2015					
<030> Contact Na	<030> Contact Name - Person USAC should contact regarding this data	contact regarding	this data	Robert	Robert O. Sledge, Jr.				
<035> Contact Ter	<035> Contact Telephone Number - Number of person identified in data line <030>	r of person identif	ied in data line <030>		6625693311 ext.				
<039> Contact En	<039> Contact Email Address - Email Address of person identified in data line	s of person identi	fied in data line <030>		rsledge@deltaland.net				
<711> <a1></a1>	<a2></a2>	 b1>	 	<>>>	<d1></d1>	<d2></d2>	<d3></d3>	<d4>></d4>	^

<d4>></d4>	Usage Allowance Action Taken When Limit Reached {select}	Other, No Usage Limits. When subscriber has voice.	Other, No Usage Limits. Naked DSL.										
	Usage Allowance (GB)	0.0	0.0										
<q3></q3>	Broadband Service - Broadband Service Usage Allowance Download Speed -Upload Speed (Mbps) (GB)	1.0	1.0										
<d2></d2>	Broadband Service - Download Speed (Mbps)	6.0	6.0										
<c> <d1></d1></c>	Total Rates and Fees	79.95	109.95										
 <	State Regulated Fees	0.0	0.0										
 b1>	Residential Rate	79.95	109.95										
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<a1></a1>	State	MS	MS										

Lakeside Telephone Company

Study Area Code: 280457

Rates, Terms and Conditions for Lifeline Service

(Response to Form 481, Line 1210)

Local exchange service rates and charges as specified below are for basic local exchange service. The rates for other ancillary services not specifically shown below are presented in Lakeside Telephone Company's tariff(s) on file with the Mississippi Public Service Commission. Unless otherwise specified, the rates and charges quoted below are for a period of one month, payable in advance and provide unlimited flat rate calling within the local exchange calling scope.

Residential Local Exchange Access Line Rates: 1 2

	R-1
Exchange Name	Rate
Lakeside	\$14.00

¹ Above listed fees do not include mandatory taxes, fees and surcharges.

² Qualified Lifeline customers are eligible for Lifeline credits or discounts as outlined in the attached Lifeline tariff.

GENERAL SUBSCRIBER SERVICES TARIFF

REDACTED FOR PUBLIC INSPECTION

LAKESIDE TELEPHONE COMPANY, INC. TC-020-0865-00

SECTION IV 5th Revised Sheet 16 Cancels 4th Revised Sheet 16

SERVICE CONNECTION CHARGES

SERVICE CHARGES

LOW-INCOME ASSISTANCE PROGRAM

(T)

General

The Company, as part of its obligations as an Eligible Telecommunications Carrier, offers a low-income assistance program. This program, Lifeline Assistance, is offered under the terms and conditions provided below:

(T)

Lifeline Assistance

A. General

Lifeline Assistance is a retail service offering available to qualifying low-income subscribers, as provided for below. Lifeline Assistance enables eligible subscribers to pay reduced charges for the following package of services: voice-grade access to the public switched network; local usage; dual-tone multi-frequency signaling or its functional equivalent; access to emergency services; access to operator services; access to interexchange service; access to directory assistance; and toll blocking. An eligible customer receives credit for the Low-Income Assistance Program pursuant to FCC Order 12-11 and MPSC Docket 2007-AD-487.

(T) (T)

B. Regulations

- 1. Unless other eligibility requirements are established by the Commission, Lifeline Assistance is available to all residential subscribers who participate in one of the following programs:
 - a) Medicaid,
 - b) Supplemental Nutrition Assistance Program (SNAP), formerly known as Food Stamps, (T)
 - c) Supplemental Security Income (SSI),
 - d) Federal Public Housing Assistance (FPHA),
 - e) Low-Income Home Energy Assistance Program (LIHEAP),
 - f) Temporary Assistance for Needy Families (TANF),
 - g) National Free Lunch Program's Free Lunch Initiative (NFLP).

Income-Based Criteria:

Household gross monthly income that does not exceed 135% of the Federal Poverty Guidelines

2. Each subscriber to Lifeline Assistance must certify in writing to the Company, under penalty of perjury, that he/she receives benefits under a program outlined in sub-paragraph B.1., above, and must, on the same document, agree to notify the Company if he/she ceases to participate in the program(s). The certification form shall conform to the requirements described herein, and shall be made available upon request to any subscriber. The Company shall retain all such subscriber certifications pursuant to FCC Order 12-11 in order to furnish proof of subscriber eligibility as may be required from time to time by Universal Service administrators.

Issue Date: 3/15/12 Effective Date: 4/15/12

Order Number:

Filed By: Robert O. Sledge, Jr., President

P. O. Box 236

GENERALASTEBSCRIBER SERVICES TARIFF

LAKESIDE TELEPHONE COMPANY, INC. TC-020-0865-00

SECTION IV 5th Revised Sheet 17 Cancels 4th Revised Sheet 17

SERVICE CONNECTION CHARGES

SERVICE CHARGES

LOW-INCOME ASSISTANCE PROGRAM (Continued)

(T)

(D)

(T)

Lifeline Assistance (Continued)

B. Regulations (Continued)

- 3. All applications for this service are subject to verifications with the state agency responsible for administration of the qualifying program. The Company may request any additional documentation deemed necessary prior to providing Lifeline benefits such as an administrating agency's official designation of eligibility in a particular means-based program sub-paragraph B.1., above, and that the telephone subscriber is the financially responsible party for the qualifying member of his or her household, or that the eligible household member is the telephone subscriber's dependent pursuant to the rules and regulations of the Internal Revenue Service.
- The Company will reconcile and confirm eligibility periodically pursuant to FCC **(T)** 4. Order 12-11. At least annually an FCC-compliant random survey of a statistically (T) valid number of the Lifeline subscribers which request that each surveyed subscriber verify under penalty of perjury that they, or a member of their household continue to participate in one of the means-based programs approved herein for eligibility by the Commission and/or survey at least annually the entire Lifeline subscriber base requesting that each surveyed subscriber verify under penalty of perjury that they, or a member of their household continue to participate in one of the means-based programs established by the Commission as eligible for lifeline funding. Lifeline subscribers who are subsequently determined to be ineligible shall be notified of their ineligibility in writing by the Company and provided 60 days from the date of such notice to rectify or otherwise demonstrate their eligibility prior to the discontinuance **(T)** of their Lifeline benefits. All unresolved disputes regarding Lifeline eligibility shall be brought to the attention of the Commission for resolution.

5.

6. A subscriber may elect at the time of subscription to Lifeline Assistance to receive toll blocking as part of Lifeline Assistance at no charge. "Toll Blocking" is a service that allows a subscriber to elect not to allow the completion of outgoing toll calls from the subscriber's residence. Local service deposit requirements will be waived for customers who voluntarily receive Toll Limitation Service.

Issue Date: 3/15/12 Effective Date: 4/15/12

Order Number:

Filed By: Robert O. Sledge, Jr., President

P. O. Box 236

GENERALISUBSCRIBERSERVICES TARIFF

LAKESIDE TELEPHONE COMPANY, INC. TC-020-0865-00

SECTION IV 1st Revised Sheet 17.1 Cancels Original Sheet 17.1

SERVICE CONNECTION CHARGES

SERVICE CHARGES

LOW-INCOME ASSISTANCE PROGRAM (Continued)

(T)

Lifeline Assistance (Continued)

Regulations (Continued) В.

- Lifeline Assistance will not be disconnected for non-payment of toll charges, however, in the event toll charges are not paid within 10 days of the mailing of the Company bill, the Company will implement Toll Blocking immediately thereafter. In addition, the Company will not deny re-establishment of local service to customers who are eligible for Lifeline Assistance and have previously been disconnected for non-payment of toll charges. Lifeline Assistance will not be connected if an outstanding balance is owed by the customer for local service.
- The Company may not collect a service deposit in order to initiate lifeline Assistance 8. if the qualifying low-income subscriber voluntarily elects toll blocking from the Company, where available. If toll blocking is unavailable, then the Company may charge a service deposit.

(D) 9. **(D)**

- Only one Lifeline service is available per residential household pursuant to FCC **(T)** Order 12-11. A household is any individual or group of individuals who are living together at the same address as one economic unit. A household may include related and unrelated persons. An "economic unit" consists of all adult individuals contributing to and sharing in the income and expenses of a household. An adult is any person eighteen years or older. If an adult has no or minimal income, and lives with someone who provides financial support to him/her, both people shall be considered part of the same household. Children under the age of eighteen living with their parents or guardians are considered to be part of the same household as their parents or guardians. A household is not permitted to receive Lifeline benefits **(T)** from multiple providers.
- A Lifeline customer may subscribe to any local service offering available to other 11. residential customers.
- The PIC charge will not be billed to Lifeline customers who subscribe to toll blocking 12. and do not presubscribe to a long distance carrier.

Issue Date: 3/15/12

Effective Date: 4/15/12

Order Number:

Filed By: Robert O. Sledge, Jr., President

P. O. Box 236

GENERALASUBSCRIBER BERVICES TARIFF

LAKESIDE TELEPHONE COMPANY, INC. TC-020-0865-00

SECTION IV 6th Revised Sheet 18 Cancels 5th Revised Sheet 18

SERVICE CONNECTION CHARGES

SERVICE CHARGES

LOW-INCOME ASSISTANCE PROGRAM (Continued)

(T)

Lifeline Assistance (Continued)

C. Credits

1. The following credit* will apply for each customer eligible for Lifeline
Assistance:

(T)

Monthly Credit*

a) Lifeline Credit①

\$ 9.25 (I)

(C) (D)

(D)

2. The Company shall apply the baseline payments received by the administrator of the Federal Lifeline Assistance program to the qualifying customer's basic local exchange service rate, pursuant to FCC Order 12-11 and MPSC Docket 2007-AD-487.

(T) (T)

 Partial payments that are received from Lifeline customers shall first be applied to local service charges and then to any outstanding toll charges.

* Credit amount will not exceed the total of the basic Residential Local Exchange and Subscriber Line Charge rate.

(D) | |-(D)

(T)

① Rates are in compliance with FCC Order 12-11 and are effective on dates determined by the FCC under Order 12-11.

(N) (N)

Issue Date:

3/15/12

Effective Date: 4/15/12

Order Number:

Filed By: Robert O. Sledge, Jr., President

P. O. Box 236

LAKESIDE TELEPHONE COMPANY (SAC 280457) ATTACHMENT - LINE 3017 ATTACHMENT REDACTED IN ENTIRETY